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	Type	L #	Hits	Search Text	DBs	Time Stamp	Comments	Error Definition	Errors
1	BRS	L1	1929	chemotherapy same (side adj effect)	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:43			0
2	BRS	L2	2804	angiotensinogen or (angiotensin adj I)	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:44			0
3	BRS	L3	0	1 same 2	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:44			0
4	BRS	L4	39191 36	(hematopoietic adj toxicity) or (hematopoietic adj progenitor adj cell) or anemia or myelosuppression or pancytopenia or thrombocytopenia or neutropenia or lymphopenia or leukopenia or stomatitis o alopecia or headache or (muscle adj pain)	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:50			0
5	BRS	L5	146	4 same 2	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:51			0
6	BRS	L6	1	4 same 2 same chemotherapy	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:53			0
7	BRS	L7	19871	cytokine	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/01 08:54			0

	Type	L #	Hits	Search Text	DBs	Time Stamp	Comments	Error Definition	Errors
8	BRS	L8	76527 2	(granulocyte adj colony adj stimulating adj factor) or (granulocyte adj macrophage adj csf) or (epidermal adj growth adj factor) or interleukin or thrombopoietin or (growth adj factor) or pixkines or (stem adj cell factor) or (flt adj ligand)	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/0 1 08:58			0
9	BRS	L9	0	(3 or 6) same 8	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/0 1 08:59			0

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(FILE 'HOME' ENTERED AT 09:10:44 ON 01 JUL 2002)

FILE 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH, AGRICOLA'
ENTERED AT

09:11:18 ON 01 JUL 2002

L1 17141 S CHEMOTHERAPY (P) (SIDE EFFECT)
L2 640491 S (HEMATOPOIETIC TOXICITY) OR (HEMATOPOIETIC
PROGENITOR CELL) O
L3 35331 S L2 (P) CHEMOTHERAPY
L4 163241 S ANGIOTENSINOGEN OR (ANGIOTENSIN I) OR (ANGIOTENSIN
II)
L5 40 S L4 (P) (L1 OR L3)
L6 20 DUPLICATE REMOVE L5 (20 DUPLICATES REMOVED)
L7 485583 S CYTOKINE
L8 1251979 S (GRANULOCYTE COLONY STIMULATING FACTOR) OR
(GRANULOCYTE MACRO
L9 7059 S (HEMATOPOIETIC CELL) (P) PRODUC?
L10 2913 S (L7 OR L8) (P) L9
L11 0 S L6 AND L10

=> log y

	Type	L #	Hits	Search Text	DBs	Time Stamp	Comments	Error Definition	Errors
1	BRS	L1	1977	chemotherapy same (side adj effect)	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/19 06:41			0
2	BRS	L2	10673	angiotensin	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/19 06:42			0
3	BRS	L3	0	angiotensin1 same 2	USPAT; US-PGPUB; EPO; JPO; DERWENT	2002/07/19 06:42			0

FILE 'HOME' ENTERED AT 09:10:44 ON 01 JUL 2002

=> file medline caplus biosis embase scisearch agricola

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=> s chemotherapy (p) (side effect)

L1 17141 CHEMOTHERAPY (P) (SIDE EFFECT)

=> s (hematopoietic toxicity) or (hematopoietic progenitor cell) or anemia or myelosuppression or
3 FILES SEARCHED...

L2 640491 (HEMATOPOIETIC TOXICITY) OR (HEMATOPOIETIC PROGENITOR CELL) OR
ANEMIA OR MYELOSUPPRESSION OR PANCYTOPENIA OR THROMBOCYTOPENIA
OR NEUTROPENIA OR LYMPHOPENIA OR STOMATITIS OR ALOPECIA OR HEADA
CHE OR (MUSCLE PAIN) OR LEUKOPENIA

=> s l2 (p) chemotherapy

L3 35331 L2 (P) CHEMOTHERAPY

=> s angiotensinogen or (angiotensin I) or (angiotensin II)

L4 163241 ANGIOTENSINOGEN OR (ANGIOTENSIN I) OR (ANGIOTENSIN II)

=> s l4 (p) (l1 or l3)

L5 40 L4 (P) (L1 OR L3)

=> duplicate remove l5

DUPLICATE PREFERENCE IS 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH'

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PROCESSING COMPLETED FOR L5

L6 20 DUPLICATE REMOVE L5 (20 DUPLICATES REMOVED)

=> d l6 1-20 ibib abs

L6 ANSWER 1 OF 20 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.

ACCESSION NUMBER: 2001:534172 BIOSIS

DOCUMENT NUMBER: PREV200100534172

TITLE: Method of promoting erythropoiesis.

AUTHOR(S): Rodgers, Kathleen E.; DiZerega, Gere

ASSIGNEE: University of Southern California

PATENT INFORMATION: US 6239109 May 29, 2001

SOURCE: Official Gazette of the United States Patent and Trademark

Office Patents, (May 29, 2001) Vol. 1246, No. 5, pp. No

Pagination. e-file.

ISSN: 0098-1133.

DOCUMENT TYPE: Patent

LANGUAGE: English

AB The present invention provides methods, compounds, pharmaceutical
compositions, and kits for the augmentation of erythropoiesis by
potentiating erythropoietin-induced differentiation with

angiotensinogen , ***angiotensin*** ***I*** (AI), AI
analogues, AI fragments and analogues thereof, ***angiotensin***

II analogues, AII fragments or analogues thereof or AII AT2 type 2
receptor agonists as a therapeutic adjunct. The method is useful for the
treatment of congenital or acquired aplastic or hypoplastic ***anemia***
associated with chronic renal failure, end-stage renal disease, renal
transplantation, cancer, AIDS, ***chemotherapy***, radiotherapy, bone
marrow transplantation and chronic diseases.

L6 ANSWER 2 OF 20 MEDLINE DUPLICATE 1
ACCESSION NUMBER: 2001213167 MEDLINE
DOCUMENT NUMBER: 21084235 PubMed ID: 11216476
TITLE: Bioactive peptides derived from food proteins preventing
lifestyle-related diseases.
AUTHOR: Yoshikawa M; Fujita H; Matoba N; Takenaka Y; Yamamoto T;
Yamauchi R; Tsuruki H; Takahata K
CORPORATE SOURCE: Research Institute for Food Science, Kyoto University, Uji,
Kyoto, Japan.
SOURCE: BIOFACTORS, (2000) 12 (1-4) 143-6.
Journal code: 8807441. ISSN: 0951-6433.
PUB. COUNTRY: Netherlands
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 200104
ENTRY DATE: Entered STN: 20010425
Last Updated on STN: 20010425
Entered Medline: 20010419

AB Many kinds of bioactive peptides which might prevent lifestyle-related
diseases are released from food proteins after enzymatic digestion.
Inhibitory peptides for ***angiotensin*** ***I*** -converting
enzyme (ACE) having anti-hypertensive effect have been isolated from
enzymatic digests of various food proteins. LKPNM, which was isolated from
the thermolysin digest of dried bonito was activated 8-fold by ACE itself
and showed a prolonged effect after oral administration. Two vasorelaxing
peptides, ovokin and ovokin(2-7), showing antihypertensive effect
after oral administration were obtained from ovalbumin digests. We found
that low molecular weight peptides derived from food proteins lowered
serum cholesterol without increasing excretion of cholesterol and bile
acids. An immunostimulating peptide isolated from an enzymatic digest of
soybean protein prevented ***alopecia*** induced by cancer
chemotherapy.

L6 ANSWER 3 OF 20 CAPLUS COPYRIGHT 2002 ACS
ACCESSION NUMBER: 1999:736492 CAPLUS
DOCUMENT NUMBER: 131:347095
TITLE: Methods to increase white blood cell survival after
chemotherapy using angiotensinogen, angiotensin I or
II and their fragments or analogs
INVENTOR(S): Rodgers, Kathleen; Dizerega, Gere
PATENT ASSIGNEE(S): University of Southern California, USA
SOURCE: PCT Int. Appl., 88 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9958140	A1	19991118	WO 1999-US10205	19990510
W: AU, CA, JP, MX				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
CA 2322963	AA	19991118	CA 1999-2322963	19990510
AU 9939798	A1	19991129	AU 1999-39798	19990510
EP 1073453	A1	20010207	EP 1999-922905	19990510
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				

PRIORITY APPLN. INFO.: US 1998-84908P P 19980511
US 1998-92633P P 19980713
WO 1999-US10205 W 19990510

OTHER SOURCE(S): MARPAT 131:347095

AB The present invention provides improved methods, kits, and pharmaceutical

comps. for increasing white blood cell survival following
chemotherapy, and mobilizing ***hematopoietic***
progenitor ***cells*** from bone marrow into peripheral blood,
comprising the administration of an effective amt. of
angiotensinogen, ***angiotensin*** ***I*** (AI), AI
analogs, AI fragments and analogs thereof, ***angiotensin***
II (AII), AII analogs, AII fragments or analogs thereof or AII AT2
type 2 receptor agonists.

REFERENCE COUNT: 8 THERE ARE 8 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L6 ANSWER 4 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1999:511174 CAPLUS

DOCUMENT NUMBER: 131:154024

TITLE: Method of promoting erythropoiesis with
angiotensinogen, angiotensins, their analogs or
fragments

INVENTOR(S): Rodgers, Kathleen E.; Dizerega, Gere

PATENT ASSIGNEE(S): University of Southern California, USA

SOURCE: PCT Int. Appl., 75 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9940106	A2	19990812	WO 1999-US2648	19990208
WO 9940106	A3	19990923		
W: AU, CA, JP, MX				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
CA 2319701	AA	19990812	CA 1999-2319701	19990208
AU 9925916	A1	19990823	AU 1999-25916	19990208
EP 1053004	A2	20001122	EP 1999-905848	19990208
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
US 6239109	B1	20010529	US 1999-245680	19990208
JP 2002509077	T2	20020326	JP 2000-530534	19990208
PRIORITY APPLN. INFO.:				
				US 1998-74106P P 19980209
				US 1998-111535P P 19981209
				WO 1999-US2648 W 19990208

OTHER SOURCE(S): MARPAT 131:154024

AB The present invention provides methods, compds., pharmaceutical compns.,
and kits for the augmentation of erythropoiesis by potentiating
erythropoietin-induced differentiation with ***angiotensinogen***,
angiotensin ***I*** (AI), AI analogs, AI fragments and analogs
thereof, ***angiotensin*** ***II*** analogs, AII fragments or
analogs thereof or AII AT2 type 2 receptor agonists as a therapeutic
adjunct. The method is useful for the treatment of congenital or acquired
aplastic or hypoplastic ***anemia*** assocd. with chronic renal
failure, end-stage renal disease, renal transplantation, cancer, AIDS,
chemotherapy, radiotherapy, bone marrow transplantation and
chronic diseases. An improved cell culture medium for promotion of
erythropoiesis is also claimed.

L6 ANSWER 5 OF 20 CAPLUS COPYRIGHT 2002 ACS

ACCESSION NUMBER: 1998:438670 CAPLUS

DOCUMENT NUMBER: 129:92270

TITLE: Clinical study on xenon-enhanced CT and its
methodological consideration

AUTHOR(S): Hyotani, Genhachi

CORPORATE SOURCE: Dep. Neurol. Surg., Wakayama Med. Coll., Wakayama,
640-0000, Japan

SOURCE: Wakayama Igaku (1998), 49(2), 223-233

CODEN: WKMIAO; ISSN: 0043-0013

PUBLISHER: Wakayama Igakkai

DOCUMENT TYPE: Journal

LANGUAGE: Japanese

AB Following studies were performed to examine the hemodynamics of brain
tumors, which seems to be useful to det. the appropriate adjuvant therapy;

(1) basic study to establish the methodol. of the xenon-enhanced CT (Xe-CT), (2) measurement of the blood flow in and around the brain tumors, (3) blood flow changes under the induced hypertension. An appropriate time of xenon inhalation and the reproducibility of the examn. were detd. in 8 volunteers. Also, inadvertent effects of Xe-CT were studied in 428 times examn. The min. inhalation time to obtain the reliable and reproducible data was 4 min. Major ***side*** ***effects*** were not encountered, although 15% of these examns. failed because of patient's movement during xenon gas inhalation. Blood flow in and around the brain tumor was measured in 37 patients with brain tumors (15 gliomas, 8 metastatic brain tumors, 14 meningiomas). A high flow area usually corresponded to that including viable tumor cells, while low flow area consisted of tissue with necrosis or brain edema. However, it was difficult to est. the invasive area of the tumor around the contrast enhanced lesion by Xe-CT. These areas were usually demonstrated as low flow area and was difficult to differentiate from necrosis or edema without tumor invasion. The changes of tumor blood flow under induced hypertension were examd. in 12 malignant brain tumor patients. Blood flow was measured before and after the induced hypertension, when blood pressure rose to nearly 140% of their initial blood pressure using ***angiotensin*** ***II*** drip infusion. Tumor blood flow increased 305 under induced hypertension in av. Autoregulation of the blood flow was not preserved in malignant brain tumors. Therefore, ***chemotherapy*** under the induced hypertensive state seems to be effective by increasing the drug delivery into the tumor tissue.

L6 ANSWER 6 OF 20 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.DUPLICATE 2

ACCESSION NUMBER: 1996:126603 BIOSIS
DOCUMENT NUMBER: PREV199698698738
TITLE: Clinical observation of chemotherapy combining with Ang II in advanced lung cancer.
AUTHOR(S): Li Li, Wang Mei-Xian; Li Yu-Lin; et al.
CORPORATE SOURCE: Norman Bethune Univ. Med. Sci., Changchun China
SOURCE: Zhongguo Zhongliu Linchuang, (1995) Vol. 22, No. 11, pp. 791-794.
ISSN: 1000-8179.
DOCUMENT TYPE: Article
LANGUAGE: Chinese
SUMMARY LANGUAGE: Chinese; English

AB It has been demonstrated that ***angiotensin*** ***II*** (Ang II) could increase blood pressure in cancer tissue, but not in normal tissues. At high blood pressure phase more anticancer drugs injected into the body would reach the cancer site. From April 1992 to January 1993, 30 cases of unresectable lung cancer patient were treated by combined ***chemotherapy*** (ADMP scheme) with Ang II. Another 30 cases of advanced lung cancer were treated with the same ADMP scheme without Ang II as control. The effective rates in the two groups were 80% and 40% respectively (P lt 0.05) and ***alopecia*** and anorexia were less in the test group. The authors considered that this method may be also more effective than conventional ***chemotherapy*** in other cancer treatment.

L6 ANSWER 7 OF 20 MEDLINE DUPLICATE 3

ACCESSION NUMBER: 95153801 MEDLINE
DOCUMENT NUMBER: 95153801 PubMed ID: 7850915
TITLE: Phase II study of a new combined primary chemotherapy regimen, intravenous methotrexate and vincristine and intraarterial adriamycin and cisplatin, for locally advanced urinary bladder cancer: preliminary results.
AUTHOR: Kuroiwa T; Naito S; Hasuo K; Kishikawa T; Masuda K; Kumazawa J
CORPORATE SOURCE: Department of Radiology, Kyushu University, Fukuoka, Japan.
SOURCE: CANCER CHEMOTHERAPY AND PHARMACOLOGY, (1995) 35 (5) 357-63.
Journal code: 7806519. ISSN: 0344-5704.
PUB. COUNTRY: GERMANY: Germany, Federal Republic of
(CLINICAL TRIAL)
(CLINICAL TRIAL, PHASE II)
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199503

ENTRY DATE: Entered STN: 19950322
Last Updated on STN: 19950322
Entered Medline: 19950316

AB A phase II study of a new combination therapy was performed using intraarterial (i.a.) cisplatin and Adriamycin in combination with i.v. methotrexate and vincristine for 27 patients with invasive urinary bladder carcinoma of stages T2-3NOMO, and the therapeutic effects were assessed. Methotrexate (20 mg/m²) was given i.v. on days 1, 15, and 22, and vincristine (0.7 mg/m²) was injected i.v. on day 2 before i.a. infusion therapy and on days 15 and 22. The i.a. ***chemotherapy*** was performed after both superior gluteal arteries had been embolized using 3- or 5-mm stainless-steel coils. A mixture of cisplatin (50-70 mg/m²) and Adriamycin (20 mg/m²) was infused i.a. via both internal iliac arteries over a period of 20-30 min. ***Angiotensin*** ***II*** (mean dose, 21 micrograms) was simultaneously infused i.a. in 15 of 27 patients. In 24 of the 27 patients, at least 2 cycles of full-dose ***chemotherapy*** were completed. The dose was decreased in the remaining 3 patients because of their poor health status and advanced age. Among the 27 patients, 9 and 14 had complete (CR) and partial responses (PR), respectively; 3 manifested no change (NC), and 1 had progressive disease (PD). The objective response rate (CR+PR) was 85.2%. Among the 27 patients staged T2-3 NOMO, 6 (CR, 1; PR, 5) underwent total cystectomies and 18 (CR, 8; PR, 8; NC, 2) had transurethral resection of a bladder tumor (TUR-Bt) or partial resections following ***chemotherapy***. The remaining 3 diminished-dose patients had no surgery. Of the 27 patients, 22 were alive after a median follow-up period of 21+ (range, 7-48+) months. No significant ***side*** ***effect*** was observed except for lower extremity paresthesias in 5 patients (18.5%). These results point to the effectiveness of this therapy and to the possibility of urinary bladder preservation in patients with invasive, advanced urinary bladder cancers.

L6 ANSWER 8 OF 20 MEDLINE DUPLICATE 4
ACCESSION NUMBER: 93264216 MEDLINE
DOCUMENT NUMBER: 93264216 PubMed ID: 8494731
TITLE: Augmentation of tumour delivery of macromolecular drugs with reduced bone marrow delivery by elevating blood pressure.
AUTHOR: Li C J; Miyamoto Y; Kojima Y; Maeda H
CORPORATE SOURCE: Department of Microbiology, Kumamoto University School of Medicine, Japan.
SOURCE: BRITISH JOURNAL OF CANCER, (1993 May) 67 (5) 975-80.
JOURNAL code: 0370635. ISSN: 0007-0920.
PUB. COUNTRY: ENGLAND: United Kingdom
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199306
ENTRY DATE: Entered STN: 19930702
Last Updated on STN: 19930702
Entered Medline: 19930618

AB Effects of ***angiotensin*** ***II*** (AT-II)-induced hypertension on the distribution of macromolecules to Walker carcinoma and to bone marrow of SMANCS [poly(styrene-co-maleic-acid)-neocarzinostatin conjugate] were investigated in rats. AT-II-induced hypertension from about 100 to 150 mmHg significantly increased the accumulation of the macromolecular drug SMANCS and 51Cr-labelled bovine serum albumin ([51Cr]BSA), representatives of macromolecular drugs, in tumour tissue. At 1 h after i.v. administration, intratumour concentrations of [51Cr]BSA and SMANCS were elevated by 1.2-1.8-fold. The higher drug accumulation in the tumour that was produced by the artificial hypertension was retained even 6 h after administration. This observation indicates an additive effect to that under normotensive conditions where intratumour macromolecular drug concentrations increase steadily during this period. Furthermore, distributions of these drugs in the bone marrow and the small intestine decreased during artificial hypertension to 60-80% of those in the normotensive state. Therefore, the drug concentration ratios of tumour/bone marrow and tumour/small intestine were increased by 1.8-2.4-fold. A decreased distribution of SMANCS to normal tissues under hypertensive conditions was also confirmed by the significant reduction of its toxicity e.g. ***leukopenia***, diarrhoea, and body weight loss, even at a lethal dose. On the contrary, [3H]methylglucose showed no remarkable difference in tumour or bone marrow accumulation under this

hypertensive condition. These results show the advantages of
macromolecules over small molecules for AT-II-induced hypertension
chemotherapy

6 ANSWER 9 OF 20 MEDLINE DUPLICATE 5
ACCESSION NUMBER: 92272030 MEDLINE
DOCUMENT NUMBER: 92272030 PubMed ID: 1590270
TITLE: Intraarterial infusion chemotherapy with
[Sar1,Ile8]angiotensin II for bladder cancer.
AUTHOR: Morita T; Kikuchi T; Hara Y; Ishikawa S; Kobayashi Y;
Ishiyama S; Tozuka K; Goto K; Takahashi K; Yoshikawa H; +
CORPORATE SOURCE: Department of Urology, Jichi Medical School, Tochigi,
Japan.
SOURCE: AMERICAN JOURNAL OF CLINICAL ONCOLOGY, (1992 Jun) 15 (3)
188-93.
Journal code: 8207754. ISSN: 0277-3732.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199206
ENTRY DATE: Entered STN: 19920710
Last Updated on STN: 19920710
Entered Medline: 19920623

AB Thirty-three patients with primary bladder cancer (nine stage T1 with
multifocal tumors and 24 stage T2-4) were treated with intraarterial
infusion ***chemotherapy*** including cisplatin, doxorubicin, and
[Sar1,Ile8] ***Angiotensin*** ***II*** (AT II). Of the 32 evaluable
patients, 12 had pathologically proven complete response (CR), 19 showed
partial response (PR), and one showed no change (NC); the overall response
rate (CR + PR) was 97%. The blood pressure increased in response to the
administration of [Sar1,Ile8]AT II in all the patients; the mean increase
in the systolic blood pressure was 36 mmHg. Most of the ***side***
effects were mild to moderate in severity, transient in nature,
and included nausea/vomiting (100%), ***alopecia*** (84%),
leukopenia (66%), ***headache*** (9%), nephrotoxicity (6%),
diarrhea (3%), skin pigmentation (3%), and neurotoxicity (3%). One patient
who dropped out of the study developed hemiplegia as a result of cerebral
infarction. The findings indicate that it is necessary to exercise caution
in selecting the patients to be subjected to this therapy. We conclude
that intraarterial infusion ***chemotherapy*** combined with a
vasoconstrictor has a significant effect not only against multifocal
superficial bladder cancer but also against invasive bladder cancer.

6 ANSWER 10 OF 20 MEDLINE
ACCESSION NUMBER: 92082261 MEDLINE
DOCUMENT NUMBER: 92082261 PubMed ID: 1746966
TITLE: Evaluation of induced hypertension chemotherapy (IHC) in
ambulatory cancer patients.
AUTHOR: Sato H; Sugiyama K; Ishizuka K; Hoshi M; Urushiyama M
CORPORATE SOURCE: Dept. Clinical Cancer Chemotherapy, Research Institute for
Cancer and Tuberculosis, Tohoku University, Sendai, Japan.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND
CHEMOTHERAPY], (1991 Dec) 18 (15) 2509-16.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199201
ENTRY DATE: Entered STN: 19920202
Last Updated on STN: 20000303
Entered Medline: 19920114

AB To evaluate ambulatory cancer ***chemotherapy*** (ACC), the clinical
response, dose intensity of anticancer drugs, toxicities, ambulatory
periods (AP) and survival days (SD) were analysed among 20 outpatients
with various types of advanced cancer who were continuously treated by
angiotensin ***II*** -IHC for the past 10 years. ACC was
assessed with a questionnaire by the patients themselves or their
families. In advanced cancer, at first, it was essentially to obtain a get
clinical response or to stabilize the condition for a while, and secondly,
to upgrade the performance status in better grade. Although AP and SD were

so differed with the individuals: AP/SD = 1692.2 +/- 1450.2 days/2075.0 +/- 1348.0 days for CR (n = 10); 1086.0 +/- 1160.2 days/1344.0 +/- 1143.7 days for PR (n = 10); and 197.3 +/- 129.2 days/471.7 +/- 362.5 days for PD (n = 3). ***Alopecia***, nausea/vomiting and appetite loss were the most frequent ***side*** ***effects***, though these were almost completely controllable by ACC. Patients and their families could be cooperated and allow receiving ACC. The key in fighting cancer is the formation of good human relationship between medical oncologists and patients (including their families) mutual confidence, and giving a sufficient explanation for therapies.

L6 ✓ ANSWER 11 OF 20 MEDLINE DUPLICATE 6
 ACCESSION NUMBER: 92028175 MEDLINE
 DOCUMENT NUMBER: 92028175 PubMed ID: 2130794
 TITLE: Clinical evaluation of chemotherapy under angiotensin II-induced hypertension in patients with advanced cancer.
 AUTHOR: Yamaue H; Tanimura H; Terashita S; Iwahashi M; Tani M; Tsunoda T; Tamai M; Mori K
 CORPORATE SOURCE: Department of Gastroenterological Surgery, Wakayama Medical College.
 SOURCE: NIPPON GEKA HOKAN. ARCHIV FUR JAPANISCHE CHIRURGIE, (1990 Jul 1) 59 (4) 302-9.
 Journal code: 0421143. ISSN: 0003-9152.
 PUB. COUNTRY: Japan
 Journal; Article; (JOURNAL ARTICLE)
 LANGUAGE: English
 FILE SEGMENT: Priority Journals
 ENTRY MONTH: 199111
 ENTRY DATE: Entered STN: 19920124
 Last Updated on STN: 20000303
 Entered Medline: 19911107

AB The clinical efficacy and indications for ***Angiotensin*** ***II*** (AT II)-induced hypertension ***chemotherapy*** were evaluated as a drug delivery system in 101 patients with advanced carcinoma. The sites of primary tumor studied included stomach (44), pancreas (18), colon (16), esophagus (6), bile duct (4), liver (3), breast (7) and 3 other single organs. Seventy four cases had distant metastases (lymph node (25), liver (29), peritoneum (16), and lung (4)). Additionally, the protocol was used 12 cases as postoperative adjuvant ***chemotherapy*** and 15 cases following exploratory laparotomy. The blood pressure was elevated to a level 1.5 times base-line. The regimens used consisted of MMC + ADR (55), FAM (38) and CDDP (8). The dosages administered were MMC 7 mg/m2, ADR 14 mg/m2 and 5-FU 350 mg/m2. The cancer ***chemotherapy*** protocol with AT II was repeated for an average of 2.6 cycles with a 2-3 week interval. The drug concentration in tumor tissues was increased 1.7 fold by AT II treatment. The response rate was 15.8% (CR 7 and PR 9), and in those patients with lymph node, liver and peritoneal metastases was 48.0, 6.9 and 6.3%, respectively. The serum levels of tumor markers decreased in 9 patients. Subjective symptoms, such as hoarseness, edema and pain, were improved. The mean survival in patients with distant metastasis who responded was 343 days, and in nonresponders was only 168 days (p less than 0.05). The ***side*** ***effects*** of this therapy were slight, typically being grade 1 and 2. Thus, the chemotherapeutic agents studied in conjunction with AT II were effective in patients with lymph node metastasis. Additionally, this regimen could be performed safely with minimal ***side*** ***effects***.

L6 ✓ ANSWER 12 OF 20 MEDLINE
 ACCESSION NUMBER: 90025160 MEDLINE
 DOCUMENT NUMBER: 90025160 PubMed ID: 2802636
 TITLE: Intra-arterial infusion chemotherapy with [Sar1, Ile8] angiotensin II in bladder cancer.
 AUTHOR: Morita T; Kikuchi T; Hara Y; Ishikawa S; Kobayashi Y; Ishiyama S; Tozuka K; Goto K; Nakashima N; Takahashi K; +
 CORPORATE SOURCE: Dept. of Urology, Jichi Medical School, Tochigi, Japan.
 SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND CHEMOTHERAPY], (1989 Oct) 16 (10) 3417-22.
 Journal code: 7810034. ISSN: 0385-0684.
 PUB. COUNTRY: Japan
 Journal; Article; (JOURNAL ARTICLE)
 LANGUAGE: Japanese
 FILE SEGMENT: Priority Journals

ENTRY MONTH: 198911
ENTRY DATE: Entered STN: 9900328
Last Updated on STN: 19970203
Entered Medline: 19891122

AB Twenty patients with bladder cancer were treated with intra-arterial infusion ***chemotherapy*** using CDDP and ADM in combination with [Sar1, Ile8] ***angiotensin*** ***II***. A catheter was introduced into internal iliac artery by Seldinger's technique, and 100 mg of CDDP, 50 mg of ADM and 1 mg of [Sar1, Ile8] ***angiotensin*** ***II*** were infused through the catheter for 40 minutes. CR was observed in 8 of 20 patients. PR in 11 and NC in 1. Therefore, the response rate (CR + PR) was 95% (19/20). ***Side*** ***effects*** were generally mild and consisted of ***leukopenia***, nausea, vomiting, diarrhea, ***alopecia***, skin pigmentation and ***headache***. Catheter-related complications were not observed. This study demonstrated that intra-arterial infusion ***chemotherapy*** with CDDP and ADM in combination with [Sar1, Ile8] ***angiotensin*** ***II*** was extremely effective in treating patients with bladder cancer.

L6 ANSWER 13 OF 20 MEDLINE

ACCESSION NUMBER: 89272076 MEDLINE
DOCUMENT NUMBER: 89272076 PubMed ID: 2543322
TITLE: Angiotensin II-induced hypertension chemotherapy of bone and soft-tissue sarcomas.
AUTHOR: Tsuchiya H; Tomita K; Sugihara M; Shimizu H; Yasutake H; Morishita H; Morikawa S; Ohno M; Bunko H; Seto M
CORPORATE SOURCE: Dept. of Orthopedic Surgery, Kanazawa University, School of Medicine.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND CHEMOTHERAPY], (1989 Apr) 16 (4 Pt 2-3) 1776-81.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
LANGUAGE: Japanese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198906
ENTRY DATE: Entered STN: 19900309
Last Updated on STN: 19900309
Entered Medline: 19890623

AB We treated 14 patients with high grade sarcomas by ***angiotensin*** ***II*** -induced hypertension ***chemotherapy***. The ***chemotherapy*** protocol described by Rosen was selected according to histological classification of sarcomas (small cell sarcoma, spindle cell sarcoma, pleomorphic sarcoma). The level of angiotensin-induced hypertension was one and half times as high as blood pressure at rest. Induced hypertension was maintained for 30-60 minutes. In three cases of 5 primary osteosarcomas, induced hypertension resulted in the increase of tumor stain and/or vascularity angiographically, and chemotherapeutic effects were CR or PR. The six cases with soft-tissue sarcomas were 2 cases each of CR, PR, and NC. The decrease of relative tumor blood flow under the condition of ***angiotensin*** ***II*** -induced hypertension was detected in 5 cases of 6 soft-tissue sarcomas by ¹³³Xe clearance method. In the case of rhabdomyosarcoma, the decrease of tumor stain and vascularity by induced hypertension was observed on angiogram. As the ***side*** ***effects*** accompanying induced hypertension, nausea and chest oppression were noted in 2 cases, respectively. In this study it was suggested that ***angiotensin*** ***II*** -induced hypertension ***chemotherapy*** was effective for osteosarcoma, but that it might be ineffective for soft-tissue sarcomas.

L6 ANSWER 14 OF 20 MEDLINE

ACCESSION NUMBER: 89149125 MEDLINE
DOCUMENT NUMBER: 89149125 PubMed ID: 2645833
TITLE: Intra-arterial infusion chemotherapy: clinical applications and current status of therapeutic effects on various malignant tumors.
AUTHOR: Itsubo M; Kameda H
CORPORATE SOURCE: First Dept. of Internal Medicine, Jikei University School of Medicine.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND CHEMOTHERAPY], (1989 Feb) 16 (2) 199-206. Ref: 32
Journal code: 7810034. ISSN: 0385-0684.

PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)

LANGUAGE: Japanese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198904
ENTRY DATE: Entered STN: 19900306
Last Updated on STN: 19900306
Entered Medline: 19890404

AB Intra-arterial infusion ***chemotherapy*** for various malignant tumors in order to improve the antitumor effects and to diminish the ***side*** ***effects*** has been performed in general since the 1950's. Numerous reports have shown favourable therapeutic effects followed by the development of the new anticancer agents. Although in recent years application of intra-arterial administration of anticancer agents alone has been limited to such target tumors as liver cancer because of application of mechanical arterial embolization using gelatin sponge cubes, attempts have been made to enhance the antitumor effect. In order to improve targeting and stagnancy of anticancer agents in the tumor area, drug delivery systems involving arrangement of the hemodynamics of the tumor area (balloon-occluded arterial infusion therapy, administration with vasoconstrictive agents such as noradrenaline or ***angiotensin*** ***II*** and/or as administration with various drug carriers (microcapsules, lipiodol, albumin microspheres, Degradable Starch Microspheres, liposomes, etc.) have been prepared and made available for clinical use with various tumors. Furthermore, development of totally implantable equipment of intra-arterial use for not only continuous infusion but one-shot injection of anticancer agents contributes to the treatment of patients longer and more frequently with less trouble. In the future intra-arterial infusion ***chemotherapy*** will have an important role for treatment of various malignant tumors, especially as one part of multimodal treatments, although the pharmacokinetics should be more fully-studied.

L6 ANSWER 15 OF 20 MEDLINE

ACCESSION NUMBER: 88182285 MEDLINE
DOCUMENT NUMBER: 88182285 PubMed ID: 2451473
TITLE: Hepatic artery infusion chemotherapy with cisplatin and adriamycin in combination with angiotensin-II in the treatment of malignant liver tumors.
AUTHOR: Morita S; Matsumoto S; Odani R
CORPORATE SOURCE: Dept. of Radiology, Kochi Municipal Central Hospital.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND CHEMOTHERAPY], (1988 Apr) 15 (4 Pt 1) 689-95.
Journal code: 7810034. ISSN: 0385-0684.

PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198805
ENTRY DATE: Entered STN: 19900308
Last Updated on STN: 19960129
Entered Medline: 19880510

AB Hepatic arterial infusion ***chemotherapy*** with cisplatin (CDDP) and adriamycin (ADR) in combination with ***angiotensin*** - ***II*** (AT-II) was performed in 19 cases of hepatocellular carcinoma (HCC), 16 cases of metastatic liver tumor (MLT) and one case of cholangiocellular carcinoma. CDDP (60-120 mg) and ADR (20-50 mg) were infused into the hepatic artery with intra-arterial instillation of AT-II (0.5-1.5 microgram/min). Transcatheter arterial embolization (TAE) was additionally performed in 10 cases of HCC and 3 cases of MLT. The response rates for infusion ***chemotherapy*** combined with TAE were 44% in HCC and 67% in MLT. On the other hand, the response rates without TAE were 0% in HCC and 42% in MLT. In some cases of HCC, however, a marked decrease in serum alpha-fetoprotein levels was observed despite the lack of effectiveness evaluated by CT scan and angiography. Although minor ***side*** ***effects*** were noted such as a mild degree of leukocytopenia and/or ***thrombocytopenia*** and hepatic and/or renal dysfunction, they were only temporary with a duration of less than 3 or 4 weeks. In 4 patients with HCC without TAE treatment, however, lethal ***side*** ***effects*** occurred including ***pancytopenia***, hepatic failure

and disseminated intravascular coagulation, and they died within 2 months after infusion ***chemotherapy***. Renal failure was not seen in either group.

L6 ANSWER 16 OF 20 MEDLINE DUPLICATE 7
ACCESSION NUMBER: 87244013 MEDLINE
DOCUMENT NUMBER: 87244013 PubMed ID: 3594429
TITLE: Efficacy of two-route chemotherapy using cis-diamminedichloroplatinum(II) and its antidote, sodium thiosulfate, in combination with angiotensin II in a rat limb tumor.
AUTHOR: Kuroiwa T; Aoki K; Taniguchi S; Hasuda K; Baba T
SOURCE: CANCER RESEARCH, (1987 Jul 15) 47 (14) 3618-23.
Journal code: 2984705R. ISSN: 0008-5472.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198708
ENTRY DATE: Entered STN: 19900305
Last Updated on STN: 19970203
Entered Medline: 19870820

AB We combined the ***angiotensin*** ***(AT-II)-induced hypertension method with "two-route ***chemotherapy***" (TRC), using cis-diamminedichloroplatinum(II) (CDDP) and its antidote, sodium thiosulfate (STS). The efficacy of the modified TRC was evaluated in rats bearing a limb tumor (transitional cell carcinoma). Immediately after infusing CDDP (15 mg/kg) and AT-II (15 micrograms/kg) via the femoral artery for 5 min, 1580 mg/kg STS (200-fold molar ratio to 15 mg/kg of CDDP) were administered i.v. for a further 5 min. Other treatments were as follows: 5 mg/kg of CDDP mixed or not mixed with 15 micrograms/kg of AT-II were given intraarterially (i.a.); 5 mg/kg of CDDP alone were injected i.v.; CDDP (15 mg/kg, i.a.) and STS (1580 mg/kg, i.v.) were simultaneously administered, without AT-II (conventional TRC). The antitumor effects of the modified TRC, evaluated by regression of tumor growth and extended life span, were superior to the other treatments. On the other hand, nephrotoxicity, loss of body weight, and ***leukopenia***, seen in the rats given TRC with AT-II, occurred less than or at the same rate as in rats given other treatments. Thus, the TRC with AT-II was the most effective treatment given to rats bearing a regionally confined tumor. The feasibility of clinical application of modified TRC using i.a. CDDP plus AT-II and i.v. STS is discussed.

L6 ANSWER 17 OF 20 MEDLINE
ACCESSION NUMBER: 87183581 MEDLINE
DOCUMENT NUMBER: 87183581 PubMed ID: 3566300
TITLE: Two-route chemotherapy using the anticancer drug cis-diamminedichloroplatinum(II) and its antidote, sodium thiosulfate.
AUTHOR: Kuroiwa T; Baba T
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND CHEMOTHERAPY], (1987 Apr) 14 (4) 1011-7.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198705
ENTRY DATE: Entered STN: 19900303
Last Updated on STN: 19900303
Entered Medline: 19870513

AB We described the efficacy of "two-route ***chemotherapy***" (TRC), in which the anticancer drug, cis-diamminedichloroplatinum (II) (DDP), is injected locally, in combination with its antidote, sodium thiosulfate (STS), given systemically. First, we tested the protective effect of sulfur-containing compounds against DDP toxicity, and found STS to be the most potent antidote of DDP. On the basis of this finding, we developed TRC using DDP and STS, and applied it for liver and lung metastasis, bladder cancer, and peritoneal disseminated tumors in experimental animals, resulting in remarkable antitumor effects without serious ***side*** ***(effects***, especially nephrotoxicity. Furthermore, we obtained an optimal increase in the lifespan of rats bearing limb tumors

when we tried TRC in combination with the ***angiotensin*** **II** (AT-II)-induced hypertensive method. We also clarified that the protection of STS against DDP toxicity was mainly due to the diminution of the active platinum level in blood. We briefly reviewed the clinical trials of TRC, and discussed the improvements which still have to be made.

L6 ANSWER 18 OF 20 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.

ACCESSION NUMBER: 1987:170063 BIOSIS
DOCUMENT NUMBER: BA83:88504
TITLE: PREOPERATIVE INTRA-ARTERIAL INFUSION CHEMOTHERAPY FOR
ADVANCED BREAST CANCER.
AUTHOR(S): ABE H
CORPORATE SOURCE: DEP. OF SURGERY I, SCH. OF MED., IWATE MED. UNIV., MORIOKA,
JAPAN.
SOURCE: J IWATE MED ASSOC, (1986 (RECD 1987)) 38 (4), 471-482.
CODEN: IIZAAX. ISSN: 0021-3284.
FILE SEGMENT: BA; OLD
LANGUAGE: Japanese

AB During the period from 1982 through 1984, twenty patients with advanced breast cancer of Stage III and IV (TNM classification) were treated with preoperative intra-arterial infusion ***chemotherapy*** and radical mastectomy. For the purpose of preoperative intra-arterial infusion, two catheters were inserted in the subclavian artery via the superficial cervical artery and internal mammary artery via the superiorepigastriac artery, respectively. Twenty patients were divided into four groups according to the administered drugs. Group 1: 6 patients administered Adriamycin (ADM) alone. Group 2: 6 patients administered ADM and 5-fluorouracil (5 FU). Group 3: 4 patients administered ADM with a infusion ***Angiotensin*** **II** (AT II) through the peripheral vein. Group 4: 4 patients administered ADM and 5 FU with use of AT II. ADM was given three times during 9 days in a 4 groups and total dose of ADM was 150 mg, and 250 mg of 5 FU was given every day in the Group 2 and the Group 4. After blood pressure was elevated by using AT II, ADM was administered through intrarterial catheter for 5 minutes in the Group 3 and the Group 4. Size of tumor and metastatic lymph nodes were measured, and reduction rate was calculated. Resected breast and lymph nodes were evaluated histologically according to Ohboshi and Shimosato's criterion. ***Side*** **effects** were also observed in the present study. The results were summarized as follows; 1) Reduction rate of all patients was 57.7 +/- 26.3% in tumors and 68.9 +/- 35.3% in lymph nodes, respectively. 2) There were no significant differences in the reduction rate among four groups. 3) Effective histological changes of the tumor were found in 61.1% of all patients, and that of the lymph nodes were found in 43.8%. 4) The most effective histological changes were observed in the Group 4. 5) ***Side*** **effects** frequently observed were gastro-intestinal disorder, ***stomatitis*** , dermatitis, alopecia, ***leukopenia*** and ***thrombocytopenia*** , but there were no patients who were discontinued the treatment because of ***side*** **effects** .

L6 ANSWER 19 OF 20 MEDLINE DUPLICATE 8

ACCESSION NUMBER: 86135323 MEDLINE
DOCUMENT NUMBER: 86135323 PubMed ID: 3937720
TITLE: Hypertensive chemotherapy of advanced gastric cancer.
AUTHOR: Bai X W
SOURCE: CHUNG-HUA CHUNG LIU TSA CHIH [CHINESE JOURNAL OF ONCOLOGY],
(1985 Sep) 7 (5) 380-1.
Journal code: 7910681. ISSN: 0253-3766.
PUB. COUNTRY: China
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Chinese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198604
ENTRY DATE: Entered STN: 19900321
Last Updated on STN: 20000303
Entered Medline: 19860415

AB Hypertensive ***chemotherapy*** of advanced gastric cancer is reported in this paper. The blood pressure of the patient was first elevated by intravenous ***angiotensin*** **II** , then mitomycin C was given for two consecutive days at doses of 20 mg and 10 mg. Out of 20 cases, it was effective in 11 (55%), especially for those with Borrmann III and IV types and poorly differentiated adenocarcinoma which recurred after

subtotal gastrectomy. The ***side*** ***effect*** of this treatment was not marked and the response satisfactory. Therefore, it may easily be accepted as the treatment for advanced gastric cancer.

L6 ANSWER 20 OF 20 MEDLINE
ACCESSION NUMBER: 85120947 MEDLINE
DOCUMENT NUMBER: 85120947 PubMed ID: 4038597
TITLE: Intra-arterial infusion chemotherapy for non-resectable pancreatic cancer using angiotensin-II and prostaglandin-E1.
AUTHOR: Ishikawa O; Ohhigashi H; Iwanaga T
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND CHEMOTHERAPY], (1985 Feb) 12 (2) 235-44.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198503
ENTRY DATE: Entered STN: 19900320
Last Updated on STN: 19900320
Entered Medline: 19850320

AB We have developed a new method of intra-arterial infusion ***chemotherapy*** for non-resectable pancreatic cancer, in order to facilitate the selective delivery of a large amount of anticancer agent to the cancer lesion. This method was carried out as follows: (1) retrograde cannulation was performed by inserting a catheter into the splenic artery after splenectomy, and many of its branches were dissected out around the body and tail of the pancreas: (2) anticancer drugs (Adriamycin and Methotrexate) were infused together with ***Angiotensin*** - ***II*** to decrease the blood flow to non-malignant tissue and to increase the flow to cancer tissue. (3) Twenty-four to 48 hours after Methotrexate was infused, rescue was performed with an infusion of Prostaglandin-E1 to reduce the degree of cytotoxic damage to normal tissue. By using these methods, it was ascertained that a large quantity of the drugs had accumulated in the cancer tissue, even though its original blood flow had been established as very poor by radioisotope and angiographical examination. This therapy was useful not only for anticancer effects on the primary lesion but also the prevention of liver metastasis. Moreover, Methotrexate and rescue therapy were shown to have no remarkable ***side*** ***effects***.

=> s cytokine

L7 485583 CYTOKINE

=> s (granulocyte colony stimulating factor) or (granulocyte macrophage csf) or (epidermal growth

1 FILES SEARCHED...

3 FILES SEARCHED...

4 FILES SEARCHED...

L8 1251979 (GRANULOCYTE COLONY STIMULATING FACTOR) OR (GRANULOCYTE MACROPHAGE CSF) OR (EPIDERMAL GROWTH FACTOR) OR INTERLEUKIN OR THROMBOPOIETIN OR (GROWTH FACTOR) OR PIXKINES OR (STEM CELL FACTOR) OR (FLT LIGAND)

=> d his

(FILE 'HOME' ENTERED AT 09:10:44 ON 01 JUL 2002)

FILE 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH, AGRICOLA' ENTERED AT 09:11:18 ON 01 JUL 2002

L1 17141 S CHEMOTHERAPY (P) (SIDE EFFECT)

L2 640491 S (HEMATOPOIETIC TOXICITY) OR (HEMATOPOIETIC PROGENITOR CELL) O

L3 35331 S L2 (P) CHEMOTHERAPY

L4 163241 S ANGIOTENSINOGEN OR (ANGIOTENSIN I) OR (ANGIOTENSIN II)

L5 40 S L4 (P) (L1 OR L3)

L6 20 DUPLICATE REMOVE L5 (20 DUPLICATES REMOVED)

L7 485583 S CYTOKINE

L8 1251979 S (GRANULOCYTE COLONY STIMULATING FACTOR) OR (GRANULOCYTE MACRO

=> s (hematopoietic cell) (p) produc?

3 FILES SEARCHED...

5 FILES SEARCHED...
L9 7059 (HEMATOPOIETIC CELL) (P) PRODUC?

=> s (l7 or l8) (p) l9
L10 2913 (L7 OR L8) (P) L9

=> s l6 and l10
L11 0 L6 AND L10

=> d his

(FILE 'HOME' ENTERED AT 09:10:44 ON 01 JUL 2002)

FILE 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH, AGRICOLA' ENTERED AT
09:11:18 ON 01 JUL 2002

L1 17141 S CHEMOTHERAPY (P) (SIDE EFFECT)
L2 640491 S (HEMATOPOIETIC TOXICITY) OR (HEMATOPOIETIC PROGENITOR CELL) O
L3 35331 S L2 (P) CHEMOTHERAPY
L4 163241 S ANGIOTENSINOGEN OR (ANGIOTENSIN I) OR (ANGIOTENSIN II)
L5 40 S L4 (P) (L1 OR L3)
L6 20 DUPLICATE REMOVE L5 (20 DUPLICATES REMOVED)
L7 485583 S CYTOKINE
L8 1251979 S (GRANULOCYTE COLONY STIMULATING FACTOR) OR (GRANULOCYTE MACRO
L9 7059 S (HEMATOPOIETIC CELL) (P) PRODUC?
L10 2913 S (L7 OR L8) (P) L9
L11 0 S L6 AND L10

=> log y

COST IN U.S. DOLLARS

SINCE FILE	TOTAL
ENTRY	SESSION
117.72	117.93

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DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)

SINCE FILE	TOTAL
ENTRY	SESSION
-1.86	-1.86

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Subject: references for 09/723,197

Please obtain the following references and deliver them to 9B-01, CM1. Thanks.

Chih-Min Kam
AU 1653
10D-16, CM1
308-9437

L6 ANSWER 6 OF 20 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.DUPLICATE

2

ACCESSION NUMBER: 1996:126603 BIOSIS
DOCUMENT NUMBER: PREV199698698738
TITLE: Clinical observation of chemotherapy combining with Ang II
in advanced lung cancer.
AUTHOR(S): Li Li, Wang Mei-Xian; Li Yu-Lin; et al.
CORPORATE SOURCE: Norman Bethune Univ. Med. Sci., Changchun China
SOURCE: Zhongguo Zhongliu Linchuang, (1995) Vol. 22, No. 11, pp.
791-794.
ISSN: 1000-8179.

L6 ANSWER 9 OF 20 MEDLINE DUPLICATE 5

ACCESSION NUMBER: 92272030 MEDLINE
DOCUMENT NUMBER: 92272030 PubMed ID: 1590270
TITLE: Intraarterial infusion chemotherapy with
[Sar1,Ile8]angiotensin II for bladder cancer.
AUTHOR: Morita T; Kikuchi T; Hara Y; Ishikawa S; Kobayashi Y;
Ishiyama S; Tozuka K; Goto K; Takahashi K; Yoshikawa H; +
CORPORATE SOURCE: Department of Urology, Jichi Medical School, Tochigi,
Japan.
SOURCE: AMERICAN JOURNAL OF CLINICAL ONCOLOGY, (1992 Jun) 15 (3)
188-93.
Journal code: 8207754. ISSN: 0277-3732.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English

L6 ANSWER 10 OF 20 MEDLINE

ACCESSION NUMBER: 92082261 MEDLINE
DOCUMENT NUMBER: 92082261 PubMed ID: 1746966
TITLE: Evaluation of induced hypertension chemotherapy (IHC) in
ambulatory cancer patients.
AUTHOR: Sato H; Sugiyama K; Ishizuka K; Hoshi M; Urushiyama M
CORPORATE SOURCE: Dept. Clinical Cancer Chemotherapy, Research Institute for
Cancer and Tuberculosis, Tohoku University, Sendai, Japan.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND
CHEMOTHERAPY], (1991 Dec) 18 (15) 2509-16.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese

L6 ANSWER 11 OF 20 MEDLINE DUPLICATE 6

ACCESSION NUMBER: 92028175 MEDLINE
DOCUMENT NUMBER: 92028175 PubMed ID: 2130794
TITLE: Clinical evaluation of chemotherapy under angiotensin
II-induced hypertension in patients with advanced cancer.

AUTHOR: Yamaue H; Tanimura H; Terashita S; Iwahashi M; Tani M;
Tsunoda T; Tamai M; Mori K
CORPORATE SOURCE: Department of Gastroenterological Surgery, Wakayama Medical
College.
SOURCE: NIPPON GEKA HOKAN. ARCHIV FUR JAPANISCHE CHIRURGIE, (1990
Jul 1) 59 (4) 302-9.
Journal code: 0421143. ISSN: 0003-9152.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English

L6 ANSWER 12 OF 20 MEDLINE

ACCESSION NUMBER: 90025160 MEDLINE
DOCUMENT NUMBER: 90025160 PubMed ID: 2802636
TITLE: Intra-arterial infusion chemotherapy with [Sar1, Ile8]
angiotensin II in bladder cancer.
AUTHOR: Morita T; Kikuchi T; Hara Y; Ishikawa S; Kobayashi Y;
Ishiyama S; Tozuka K; Goto K; Nakashima N; Takahashi K; +
CORPORATE SOURCE: Dept. of Urology, Jichi Medical School, Tochigi, Japan.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND
CHEMOTHERAPY], (1989 Oct) 16 (10) 3417-22.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese

L6 ANSWER 15 OF 20 MEDLINE

ACCESSION NUMBER: 88182285 MEDLINE
DOCUMENT NUMBER: 88182285 PubMed ID: 2451473
TITLE: Hepatic artery infusion chemotherapy with cisplatin and
adriamycin in combination with angiotensin-II in the
treatment of malignant liver tumors.
AUTHOR: Morita S; Matsumoto S; Odani R
CORPORATE SOURCE: Dept. of Radiology, Kochi Municipal Central Hospital.
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND
CHEMOTHERAPY], (1988 Apr) 15 (4 Pt 1) 689-95.
Journal code: 7810034. ISSN: 0385-0684.
PUB. COUNTRY: Japan
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: Japanese

L6 ANSWER 16 OF 20 MEDLINE DUPLICATE 7

ACCESSION NUMBER: 87244013 MEDLINE
DOCUMENT NUMBER: 87244013 PubMed ID: 3594429
TITLE: Efficacy of two-route chemotherapy using
cis-diamminedichloroplatinum(II) and its antidote, sodium
thiosulfate, in combination with angiotensin II in a rat
limb tumor.
AUTHOR: Kuroiwa T; Aoki K; Taniguchi S; Hasuda K; Baba T
SOURCE: CANCER RESEARCH, (1987 Jul 15) 47 (14) 3618-23.
Journal code: 2984705R. ISSN: 0008-5472.
PUB. COUNTRY: United States
Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English

L6 ANSWER 20 OF 20 MEDLINE

ACCESSION NUMBER: 85120947 MEDLINE
DOCUMENT NUMBER: 85120947 PubMed ID: 4038597
TITLE: Intra-arterial infusion chemotherapy for non-resectable
pancreatic cancer using angiotensin-II and
prostaglandin-E1.
AUTHOR: Ishikawa O; Ohhigashi H; Iwanaga T
SOURCE: GAN TO KAGAKU RYOHO [JAPANESE JOURNAL OF CANCER AND
CHEMOTHERAPY], (1985 Feb) 12 (2) 235-44.

Journal code: 7810034. ISSN: 0385-0684.

PUB. COUNTRY: Japan

Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: Japanese